

HOW TO BEGIN YOUR ACTION TO ESTABLISH PARENTAGE

If you and the other parent were never married you will need to open a case in order to request and obtain orders for custody, visitation or child support. If there is an open child support case with the Department of Child Support Services you may be able to bring your request for custody in that case. If there is no case with the Department of Child Support Services then you need to file a Petition to Establish a Parental Relationship. This will only open the case. You may need to file an Order to Show Cause to get custody or support orders if the other party files a Response to this Petition. You **MUST** file the Judgment forms in this packet to finalize your case.

1. **COMPLETE THE FORMS** (*Type or print in black ink*)

- Declaration for Court Assignment
- Summons
- Petition with Declaration under the UCCJEA attached

2. **MAKE COPIES**

You will need to make two copies of each form, front and back.

3. **FILE THE PAPERS**

Take the originals and copies to the Clerk's Office, in Ventura, Room 208, in Simi Valley, on the first floor. You will have to pay a filing fee. The Fee Schedule may be obtained from the Clerk. If you cannot afford the fee, you may be able to have that fee "waived". You will need to complete the FEE WAIVER PACKET. The clerk will keep the originals and return both copies to you, stamped to show that they have been "filed". One copy is for you and one copy is to be "served" on the other party.

4. **"SERVE" THE PAPERS**

"Service" means that someone other than you, over the age of 18, must *personally* deliver a copy of the filed papers to the other party. The other party also gets a package of blank forms so that they can file their Response. Those blank forms are in this packet after the Petition. If you wish you can arrange for the Sheriff to serve the other party. If the other party is out of state or if you don't know their whereabouts, you may want to speak to the Family Law Facilitator about other ways to serve the papers.

5. **FILE THE PROOF OF SERVICE**

The person who "serves" the papers must complete and sign the "Proof of Service". That paper must then be filed with the court.

YOU MUST FINALIZE YOUR CASE WITH THE JUDGMENT FORMS IN THE BACK OF THIS PACKET.

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): TELEPHONE NO.: BAR NO.: ATTORNEY FOR (<i>Name</i>):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA <input type="checkbox"/> 800 S. VICTORIA AVE., VENTURA CA. 93009 <input type="checkbox"/> 3855-F ALAMO ST. SIMI VALLEY, CA. 93063-2110	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
DECLARATION FOR COURT ASSIGNMENT <i>(Family Law and Unlawful Detainer and all other General Civil actions ONLY)</i>	CASE NUMBER:

Family Law, Domestic Violence, Paternity, Harassment, Unlawful Detainer, and all other General Civil actions presented for filing **MUST** be accompanied by this declaration.

The undersigned declares that the above entitled matter is filed for proceedings in the:

☐ **East County Division**, 3855-F Alamo St., Simi Valley, CA 93063 (Based upon Zip Code designation.)

<input type="checkbox"/> 91301	<input type="checkbox"/> 91302	<input type="checkbox"/> 91304	<input type="checkbox"/> 91307	<input type="checkbox"/> 91320 - <u>Excluding Family Law</u>
<input type="checkbox"/> 91360	<input type="checkbox"/> 91361	<input type="checkbox"/> 91362	<input type="checkbox"/> 91377	<input type="checkbox"/> 93020 <input type="checkbox"/> 93021
<input type="checkbox"/> 93062	<input type="checkbox"/> 93063	<input type="checkbox"/> 93064	<input type="checkbox"/> 93065	<input type="checkbox"/> 91363

☐ **Ventura Division**, 800 S. Victoria Ave., Ventura, CA 93009 (Venue does NOT fall within the Zip Codes above but is within Ventura County.)

For the checked reason:

<input type="checkbox"/> Contract	Performance in the division is expressly provided for
<input type="checkbox"/> Equity	The cause of action arose within the division
<input type="checkbox"/> Eminent Domain	The property is located within the division
<input type="checkbox"/> Family Law	Plaintiff, defendant, petitioner or respondent resides within the division
<input type="checkbox"/> Harassment	Plaintiff, defendant, petitioner or respondent resides with the division
<input type="checkbox"/> Mandate	The defendant functions wholly within the division
<input type="checkbox"/> Name Change	The petitioner resides within the division
<input type="checkbox"/> Paternity	Plaintiff, defendant, petitioner or respondent resides within the division.
<input type="checkbox"/> Personal Injury	The injury occurred within the division or the defendant resides within the division
<input type="checkbox"/> Personal Property	The property is located within the division or the defendant resides within the division
<input type="checkbox"/> Prohibition	The defendant functions wholly within the division
<input type="checkbox"/> Review	The defendant functions wholly within the division
<input type="checkbox"/> Title to Real Property	The property is located within the division
<input type="checkbox"/> Unlawful Detainer	The property is located within the division
<input type="checkbox"/> Domestic Violence	Plaintiff, defendant, petitioner or respondent resides within the division
<input type="checkbox"/> Civil not otherwise specified	_____

(Venue Rule Applicable)

The address of the accident, performance, party, detention, place of business, or other factor which qualifies this case for filing in the division:

Name: _____ Address: _____

Upon information and belief, I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____ Signature of Attorney/Party _____

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): NO.:	FOR COURT USE ONLY
ATTORNEY FOR (<i>Name</i>): COURT NAME: SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:	
CONSENT FOR COURT ASSIGNMENT <i>(Family Law)</i>	
CASE NUMBER:	

The undersigned hereby consents that the cause titled and numbered above may be tried by **Bruce A. Young** Court Commissioner of the Ventura County Superior Court, as temporary judge, in accordance with Article 6, Section 21 of the Constitution of the State of California.

It is understood by the undersigned that by order of the Presiding Judge of the Ventura County Superior Court, Commissioner Bruce A. Young has been appointed to act as temporary judge to try the above referenced case, hear and decide all motions, and make any orders including sentencing connected with this case. It is understood that Commissioner Bruce A. Young, has been appointed to try the case referred to, and has taken the necessary oath of office to try the case as temporary judge.

Dated: _____

Signature of litigant or attorney

**SUMMONS—UNIFORM PARENTAGE—PETITION FOR
CUSTODY AND SUPPORT**

CITACION JUDICIAL—DERECHO DE FAMILIA

NOTICE TO RESPONDENT (Name):
AVISO AL DEMANDADO (Nombre):

FOR COURT USE ONLY
(SOLO PARA USO DE LA CORTE)

You are being sued. A usted le estan demandando.

PETITIONER'S NAME IS:
EL NOMBRE DEL DEMANDANTE ES:

CASE NUMBER: (Número del Caso)

You have **30 CALENDAR DAYS** after this Summons and Petition are served on you to file a *Response to Petition to Establish Parental Relationship* (form FL-220) or *Response to Petition for Custody and Support of Minor Children* (form FL-270) at the court and serve a copy on the petitioner. A letter or phone call will not protect you.

If you do not file your Response on time, the court may make orders affecting custody of your children. You may be ordered to pay support and attorney fees and costs. If you cannot pay the filing fee, ask the clerk for a fee waiver form. If you want legal advice, contact a lawyer immediately.

*Usted tiene **30 DIAS CALENDARIOS** después de recibir oficialmente esta citación judicial y petición, para completar y presentar su formulario de Respuesta (Response form FL-220) ante la corte. Una carta o una llamada telefónica no le ofrecerá protección.*

Si usted no presenta su Respuesta a tiempo, la corte puede expedir órdenes que afecten la custodia de sus hijos ordenen que usted pague mantención, honorarios de abogado y las costas. Si no puede pagar las costas por la presentación de la demanda, pida al actuario de la corte que le dé un formulario de exoneración de las mismas (Waiver of Court Fees and Costs).

Si desea obtener consejo legal, comuníquese de inmediato con un abogado.

NOTICE *The restraining order on the back is effective against both mother and father until the petition is dismissed, a judgment is entered, or the court makes further orders. This order is enforceable anywhere in California by any law enforcement officer who has received or seen a copy of it.*

AVISO *Las prohibiciones judiciales que aparecen al reverso de esta citación son efectivas para ambos cónyuges, madre el esposo como la esposa, hasta que la petición sea rechazada, se dicte una decisión final o la corte expida instrucciones adicionales. Dichas prohibiciones pueden hacerse cumpliren cualquier parte de California por cualquier agente del orden público que las haya recibido o que haya visto una copia de ellas.*

1. The name and address of the court is: *(El nombre y dirección de la corte es)*

2. The name, address, and telephone number of petitioner's attorney, or petitioner without an attorney, is:
(El nombre, la dirección y el número de teléfono del abogado del demandante, o del demandante que no tiene abogado, es)

[SEAL]

Date (Fecha): _____ Clerk (Actuario), by _____, Deputy

NOTICE TO THE PERSON SERVED: You are served

a. ☐ as an individual.

b. ☐ on behalf of respondent

under: ☐ Code Civ. Proc., § 416.60 (minor)

☐ Code Civ. Proc., § 416.70 (ward or conservatee)

c. ☐ by personal delivery on (date):

(Read the reverse for important information)

(Lea el reverso para obtener información de importancia)

☐ Code Civ. Proc., § 416.90
(individual)

☐ other:

STANDARD RESTRAINING ORDER—SUMMONS
Uniform Parentage Act, Petition for Custody
PROHIBICION JUDICIAL ESTANDARE—Ley Uniforme de Paternidad

STANDARD RESTRAINING ORDER

You and the other party are restrained from removing from the state the minor child or children for whom this action seeks to establish a parent-child relationship without the prior written consent of the other party or an order of the court.

This restraining order is effective against petitioner upon filing a petition and against respondent on personal service of the summons and petition or on waiver and acceptance of service by respondent.

This restraining order is effective until the judgment is entered, the petition is dismissed, or the court makes a further order.

This order is enforceable anywhere in California by any law enforcement officer who has received or seen a copy of it.

PROHIBICIONES JUDICIALES ESTANDARES

A partir de este momento, a usted y a la otra parte se les prohíbe que saquen del estado al hijo o hijos menores de las partes, para quienes esta acción judicial procura establecer una relación entre hijo y padres, sin el consentimiento previo por escrito de la otra parte o sin una orden de la corte.

Esta prohibición judicial entrará en vigencia para el demandante una vez presentada la petición, y para el demandado una vez que éste reciba la notificación personal de la citación judicial y petición, o una vez que renuncie su derecho a recibir dicha notificación y se dé por notificado.

Esta prohibición judicial continuará en vigencia hasta que se dicte la decisión final, la petición sea rechazada o la corte expida instrucciones adicionales.

Podrán hacerse cumplir en cualquier parte de California por cualquier agente del orden público que las haya recibido o que haya visto una copia de ellas.

- Form Approved for Optional Use
Judicial Council of California
FL-200 [Rev. January 1, 2003]

Page 1 of 2

Family Code, § 7630
www.courtinfo.ca.gov

PETITIONER: RESPONDENT:	CASE NUMBER:
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Petitioner requests the court to make the determinations indicated below.

7. PARENT-CHILD RELATIONSHIP

- a. ☐ Respondent b. ☐ Petitioner
 c. ☐ Other (*specify*):

is the parent of the children listed in item 2.

8. CHILD CUSTODY AND VISITATION

- | | Petitioner | Respondent | Joint | Other |
|------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Legal custody of children to | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Visitation of children: | | | | |

(1) ☐ None

(2) ☐ Reasonable visitation.

(3) ☐ Petitioner ☐ Respondent should have the right to visit the children as follows:

(4) ☐ Visitation with the following restrictions (*specify*):

d. Facts in support of the requested custody and visitation orders are (*specify*):

☐ Contained in the attached declaration.

e. ☐ I request mediation to work out a parenting plan.

9. REASONABLE EXPENSES OF PREGNANCY AND BIRTH:

Reasonable expenses of pregnancy and birth be paid by as follows:	Petitioner <input type="checkbox"/>	Respondent <input type="checkbox"/>	Joint <input type="checkbox"/>
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10. FEES AND COSTS OF LITIGATION

	Petitioner	Respondent	Joint
a. Attorney fees to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. NAME CHANGE

☐ Children's names be changed, according to Family Code section 7638, as follows (*specify*):

12. CHILD SUPPORT

The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

13. I have read the restraining order on the back of the *Summons* (FL-210) and I understand it applies to me when this Petition is filed.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)	 (SIGNATURE OF PETITIONER)
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A blank *Response to Petition to Establish Parental Relationship* (form FL-220) must be served on the Respondent with this Petition.

NOTICE: If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent. Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

- | | | | | | |
|---|--|---|--|---------------|-----|
| a. Child's name | | Place of birth | | Date of birth | Sex |
| Period of residence
to present | Address
<input type="checkbox"/> Confidential | Person child lived with (<i>name and present address</i>) | | Relationship | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| b. Child's name | | Place of birth | | Date of birth | Sex |
| <input type="checkbox"/> Residence information is the same as given above for child a.
(If NOT the same, provide the information below.) | | | | | |
| Period of residence
to present | Address
<input type="checkbox"/> Confidential | Person child lived with (<i>name and present address</i>) | | Relationship | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

- | | | |
|--|--|--|
| Form Approved for Optional Use
Judicial Council of California
FL-105/GC-120 [Rev. January 1, 2003] | DECLARATION UNDER UNIFORM CHILD CUSTODY
JURISDICTION AND ENFORCEMENT ACT (UCCJEA) | Page 1 of 2

Family Code, § 3400 et seq.
Probate Code, §§ 1510(f), 1512
www.courtinfo.ca.gov |
|--|--|--|

SHORT TITLE: _____	CASE NUMBER:
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4. Have you participated as a party or a witness or in some other capacity in another litigation or custody proceeding, in California or elsewhere, concerning custody of a child subject to this proceeding?

☐ No ☐ Yes (If yes, provide the following information:)

a. Name of each child:

b. Capacity of declarant: ☐ party ☐ witness ☐ other (specify):

c. Court (specify name, state, location):

d. Court order or judgment (date):

5. Do you have information about a custody proceeding pending in a California court or any other court concerning a child subject to this proceeding, other than that stated in item 4?

☐ No ☐ Yes (If yes, provide the following information:)

a. Name of each child:

b. Nature of proceeding: ☐ dissolution or divorce ☐ guardianship ☐ adoption ☐ other (specify):

c. Court (specify name, state, location):

d. Status of proceeding:

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child subject to this proceeding?

☐ No ☐ Yes (If yes, provide the following information:)

a. Name and address of person <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div> <div style="width: 40%;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div> </div>	b. Name and address of person <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div> <div style="width: 40%;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div> </div>	c. Name and address of person <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div> <div style="width: 40%;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div> </div>
Name of each child 	Name of each child 	Name of each child

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)		(SIGNATURE OF DECLARANT)
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7. ☐ Number of pages attached after this page:

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> TELEPHONE NO.: E-MAIL ADDRESS (<i>Optional</i>): ATTORNEY FOR (<i>Name</i>): </div> <div style="width: 45%;"> FAX NO. (<i>Optional</i>): </div> </div>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
PROOF OF SERVICE OF SUMMONS	CASE NUMBER:

1. At the time of service I was at least 18 years of age and not a party to this action. **I served the respondent with copies of:**
 - a. ☐ Family Law: *Petition* (form FL-100), *Summons* (form FL-110), and blank *Response* (form FL-120)
 - or—
 - b. ☐ Family Law—Domestic Partnership: *Petition—Domestic Partnership* (form FL-103), *Summons* (form FL-110), and blank *Response—Domestic Partnership* (form FL-123)
 - or—
 - c. ☐ Uniform Parentage: *Petition to Establish Parental Relationship* (form FL-200), *Summons* (form FL-210), and blank *Response to Petition to Establish Parental Relationship* (form FL-220)
 - or—
 - d. ☐ Custody and Support: *Petition for Custody and Support of Minor Children* (form FL-260), *Summons* (form FL-210), and blank *Response to Petition for Custody and Support of Minor Children* (form FL-270)
 - and
 - e. ☐ (1) ☐ Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (form FL-105)
 - (2) ☐ Completed and blank *Declaration of Disclosure* (form FL-140)
 - (3) ☐ Completed and blank *Schedule of Assets and Debts* (form FL-142)
 - (4) ☐ Completed and blank *Income and Expense Declaration* (form FL-150)
 - (5) ☐ Completed and blank *Financial Statement (Simplified)* (form FL-155)
 - (6) ☐ Completed and blank *Property Declaration* (form FL-160)
 - (7) ☐ *Order to Show Cause* (form FL-300), *Application for Order and Supporting Declaration* (form FL-310), and blank *Responsive Declaration to Order to Show Cause or Notice of Motion* (form FL-320)
 - (8) ☐ Other (*specify*):

2. Address where respondent was served:

3. I served the respondent by the following means (*check proper box*):
 - a. ☐ **Personal service.** I personally delivered the copies to the respondent (Code Civ. Proc., § 415.10) on (*date*): _____ at (*time*): _____
 - b. ☐ **Substituted service.** I left the copies with or in the presence of (*name*): _____ who is (*specify title or relationship to respondent*): _____
 - (1) ☐ **(Business)** a person at least 18 years of age who was apparently in charge at the office or usual place of business of the respondent. I informed him or her of the general nature of the papers
 - (2) ☐ **(Home)** a competent member of the household (at least 18 years of age) at the home of the respondent. I informed him or her of the general nature of the papers

PETITIONER:	CASE NUMBER:
RESPONDENT:	

3. b. (cont.) on (date): at (time):

I thereafter mailed additional copies (by first class, postage prepaid) to the respondent at the place where the copies were left (Code Civ. Proc., § 415.20b) on (date):

A **declaration of diligence** is attached, stating the actions taken to first attempt personal service.

c. ☐ **Mail and acknowledgment service.** I mailed the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid, on (date): from (city):

(1) ☐ with two copies of the *Notice and Acknowledgment of Receipt (Family Law)* (form FL-117) and a postage-paid return envelope addressed to me. **(Attach completed Notice and Acknowledgment of Receipt (Family Law) (form FL-117).)** (Code Civ. Proc., § 415.30.)

(2) ☐ to an address outside California (by registered or certified mail with return receipt requested). **(Attach signed return receipt or other evidence of actual delivery to the respondent.)** (Code Civ. Proc., § 415.40.)

d. ☐ **Other** (specify code section):

☐ Continued on Attachment 3d.

4. The "NOTICE TO THE PERSON SERVED" on the *Summons* was completed as follows (Code Civ. Proc., §§ 412.30, 415.10, 474):

a. ☐ As an individual **or**

b. ☐ On behalf of respondent who is a

(1) ☐ minor. (Code Civ. Proc., § 416.60.)

(2) ☐ ward or conservatee. (Code Civ. Proc., § 416.70.)

(3) ☐ other (specify):

5. Person who served papers

Name:

Address:

Telephone number:

This person is

a. ☐ exempt from registration under Business and Professions Code section 22350(b).

b. ☐ not a registered California process server.

c. ☐ a registered California process server: ☐ an employee or ☐ an independent contractor

(1) Registration no.:

(2) County:

d. **The fee** for service was (specify): \$

6. ☐ **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

—or—

7. ☐ **I am a California sheriff, marshal, or constable**, and I certify that the foregoing is true and correct.

Date:

(NAME OF PERSON WHO SERVED PAPERS)

(SIGNATURE OF PERSON WHO SERVED PAPERS)

NOTICE

**ALL OF THE FOLLOWING FORMS ARE LEFT
BLANK AND MUST BE SERVED
ON THE RESPONDENT
ALONG WITH A COPY OF THE DOCUMENTS
YOU HAVE FILED**

HOW TO RESPOND TO AN ACTION TO ESTABLISH PARENTAGE

1. **COMPLETE THE FORMS** *(Type or print in black ink)*
 - Response to Petition to Establish a Parental Relationship
 - Declaration under the UCCJEA
 - Proof of Service
2. **MAKE A COPY OF ALL FORMS AND HAVE THEM SERVED**

The copy is to be "served" on the other party, the Petitioner. Service means the *copy* must be mailed to the Petitioner by someone over the age of 18 other than you. You cannot "serve" it yourself.
3. **HAVE THE PROOF OF SERVICE SIGNED**

The person who mailed the copy to Petitioner must sign the Proof of Service. Once the Proof of Service has been signed, make one additional copy of all the forms.
4. **FILE THE PAPERS**

Take the original and one copy to the Clerk's Office, in Ventura, Room 208, in Simi Valley, on the first floor. You will have to pay a filing fee. The Fee Schedule may be obtained from the Clerk. If you cannot afford the fee, you may be able to have that fee "waived". You will need to complete the FEE WAIVER PACKET. The clerk will keep the original and return the copy to you, stamped to show that it has been "filed". That copy is for your records.

THESE PAPERS ONLY BEGIN THE ACTION. THE RESPONSE
SHOWS THE COURT THAT YOU ARE A PARTICIPANT IN THE
ACTION. ADDITIONAL FORMS ARE NEEDED TO GET CUSTODY OR
SUPPORT ORDERS AND TO GET A FINAL JUDGMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.: E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):</div> <div>FAX NO. (Optional):</div> </div>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
RESPONSE TO PETITION TO ESTABLISH PARENTAL RELATIONSHIP (Uniform Parentage)	CASE NUMBER:

1. The children are (name each):

<u>Child's name</u>	<u>Date of birth</u>	<u>Age</u>	<u>Sex</u>
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- b. ☐ A child who is not yet born
2. The petitioner is
 - a. ☐ the mother of the children listed above.
 - b. ☐ the father of the children listed above.
 - c. ☐ not certain whether he or she is the biological parent of the children listed above.
 - d. ☐ the child or child's representative (specify court and date of appointment):
 - e. ☐ other (specify):
3. The respondent
 - a. ☐ lives in the State of California.
 - b. ☐ was in California when the listed children were conceived.
 - c. ☐ neither a nor b
 - d. ☐ other (specify):
4. The children
 - a. ☐ live or are in this county.
 - b. ☐ are children of a parent who is deceased, and proceedings for administration of the estate have been or could be started in this county.
5. The respondent is
 - a. ☐ the father of the children listed in item 1 above.
 - b. ☐ the mother of the children listed in item 1 above.
 - c. ☐ not certain if he or she is the parent of the children listed in item 1 above.
 - d. ☐ not the parent of the children listed in item 1 above.
 - e. ☐ other (specify):
6. Additional statements
 - a. ☐ Parentage has been established by a Voluntary Declaration of Paternity (attach copy).
 - b. ☐ Parentage has been established in another case ☐ governmental child support ☐ other (specify):
 - c. ☐ Public assistance is being provided to the children.

PETITIONER: _____ RESPONDENT: _____	CASE NUMBER: _____
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The respondent requests that the court make the orders listed below.

7. Parent-child relationship (check all that apply):

- a. ☐ Respondent ☐ Petitioner ☐ Other (specify): _____ is the parent of the children listed in item 1.
- b. ☐ Respondent ☐ Petitioner ☐ Other (specify): _____ is not the parent of the children listed in item 1.
- c. ☐ Respondent requests genetic (blood) tests to determine whether the ☐ petitioner ☐ respondent is the parent of the children listed.

8. Child custody and visitation

- a. If ☐ Petitioner ☐ Respondent ☐ Other is found to be the parent of the children in listed in item 1:
- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Petitioner | Respondent | Joint | Other |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- b. Legal custody of the children should go to ☐
- c. Physical custody of the children should go to ☐
- d. Visitation of the children should be as follows:
- (1) ☐ None
- (2) ☐ Reasonable visitation
- (3) ☐ Petitioner ☐ Respondent should have the right to visit the children as follows (specify): _____
- (4) ☐ Visitation should occur with the following restrictions (specify): _____
- (5) ☐ I request mediation to work out a parenting plan.

9. Reasonable expenses of pregnancy and birth

Reasonable expenses of pregnancy and birth should be paid by

Petitioner	Respondent	Both
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Fees and costs of litigation

- | | | |
|--------------------------|--------------------------|--------------------------|
| Petitioner | Respondent | Both |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- a. Attorney fees should be paid by ☐
- b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings should be paid by ☐

11. Name change. ☐ The children's names should be changed, according to Family Code section 7638, as follows (specify old and new names): _____

12. Other orders requested (specify): _____

13. Child support. The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

I have read the restraining order on the back of the *Summons* (form FL-210) and I understand it applies to me.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

(TYPE OR PRINT NAME)		(SIGNATURE OF RESPONDENT)
----------------------	--	---------------------------

NOTICE: If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent. Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

- | | | | | | |
|---|--|---|--|---------------|-----|
| a. Child's name | | Place of birth | | Date of birth | Sex |
| Period of residence
to present | Address
<input type="checkbox"/> Confidential | Person child lived with (<i>name and present address</i>) | | Relationship | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| b. Child's name | | Place of birth | | Date of birth | Sex |
| <input type="checkbox"/> Residence information is the same as given above for child a.
(If NOT the same, provide the information below.) | | | | | |
| Period of residence
to present | Address
<input type="checkbox"/> Confidential | Person child lived with (<i>name and present address</i>) | | Relationship | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

- Form Approved for Optional Use
Judicial Council of California
FL-105/GC-120 [Rev. January 1, 2003]

**DECLARATION UNDER UNIFORM CHILD CUSTODY
JURISDICTION AND ENFORCEMENT ACT (UCCJEA)**

SHORT TITLE: _____	CASE NUMBER:
-----------------------	----------------------

4. Have you participated as a party or a witness or in some other capacity in another litigation or custody proceeding, in California or elsewhere, concerning custody of a child subject to this proceeding?

☐ No ☐ Yes (If yes, provide the following information:)

a. Name of each child:

b. Capacity of declarant: ☐ party ☐ witness ☐ other (specify):

c. Court (specify name, state, location):

d. Court order or judgment (date):

5. Do you have information about a custody proceeding pending in a California court or any other court concerning a child subject to this proceeding, other than that stated in item 4?

☐ No ☐ Yes (If yes, provide the following information:)

a. Name of each child:

b. Nature of proceeding: ☐ dissolution or divorce ☐ guardianship ☐ adoption ☐ other (specify):

c. Court (specify name, state, location):

d. Status of proceeding:

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child subject to this proceeding?

☐ No ☐ Yes (If yes, provide the following information:)

a. Name and address of person <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div>	b. Name and address of person <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div>	c. Name and address of person <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights </div>
Name of each child 	Name of each child 	Name of each child

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

_____ (TYPE OR PRINT NAME)	<div style="display: flex; align-items: center; justify-content: center;"> _____ (SIGNATURE OF DECLARANT) </div>
-------------------------------	--

7. ☐ Number of pages attached after this page:

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>):	TELEPHONE NO.:	<i>FOR COURT USE ONLY</i>
ATTORNEY FOR (<i>Name</i>):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
SHORT TITLE OF CASE:		
PROOF OF SERVICE		CASE NUMBER:

1. At the time of service, I was at least 18 years of age and not a party to this action.

2. I served the following documents:

- | | |
|---|--|
| <input type="checkbox"/> Summons | <input type="checkbox"/> Responsive Declaration re Order to |
| <input type="checkbox"/> Petition | Show Cause/Notice of Motion |
| <input type="checkbox"/> Response | <input type="checkbox"/> Income & Expense Declaration |
| <input type="checkbox"/> Complaint | <input type="checkbox"/> Order After Hearing |
| <input type="checkbox"/> Answer | <input type="checkbox"/> Blank Response |
| <input type="checkbox"/> UCCJEA Declaration | <input type="checkbox"/> Blank Answer |
| <input type="checkbox"/> Order to Show Cause | <input type="checkbox"/> Blank Responsive Declaration |
| <input type="checkbox"/> Notice of Motion | <input type="checkbox"/> Blank Income and Expense Declaration |
| <input type="checkbox"/> Temporary Restraining Order | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> Mediation/Orientation Appointment | _____ |
| Fact Sheet | _____ |

3. Party served:

4. Address:

5. Method of service:

- ☐ **Personal service:** By personal delivery to the person identified in paragraph 3.

Date of Service:

Time of Service:

- ☐ **By Mail:** By mailing copies to the person identified in paragraph 3, with postage fully prepaid, by first class mail as follows:

Date of Mailing:

Place of Deposit:

- ☐ With two copies of the Notice and Acknowledgment of Receipt and stamped return envelope addressed to me. (Attach signed Notice & Acknowledgment of Receipt)
- ☐ To an address outside of California with return receipt requested (Attach Returned Receipt)

PROOF OF SERVICE

6. Person Serving (name, address and telephone number):

7. Person serving, additional information

- ☐ Fee for service
 - ☐ Not a registered California process server.
 - ☐ Exempt from registration under B&P section 22350(b)
 - ☐ Registered California process server:
 - ☐ Employee or independent contractor
- Registration Number:
County of Registration:

I declare under the penalty of perjury and pursuant to the laws of the State of California that the foregoing is true and correct. Executed on _____ at _____.

Signature of Declarant

I am a California sheriff, marshal, or constable, and I certify that the foregoing is true and correct. Executed on _____ at _____.

Signature

PROOF OF SERVICE

FORMS TO BE USED TO FILE YOUR FINAL JUDGMENT

1. **REQUEST TO ENTER DEFAULT.** If the other side has not filed a Response to your Petition. **Do Not Use if a Response has been filed.** Include one stamped envelope addressed to Respondent with this form.
2. **DECLARATION FOR DEFAULT OR UNCONTESTED JUDGMENT** If the other party has not filed a Response, you are taking a ‘Default’ against him or her. Fill out this form for **Default**. If you and the other party have an agreement, your matter is uncontested. Fill out this form for an **uncontested matter**.
3. **ADVISEMENT AND WAIVER OF RIGHTS** The Petitioner must sign this form in all cases. If the matter is proceeding by agreement, the Respondent must sign this waiver also. This form is attached to the previous form.
4. **JUDGMENT** To be used in all cases to finalize your matter. Include the attachments for child custody, visitation, and support, as needed. You may attach a Dissomaster print-out to calculate child support.
5. **INFORMATION SHEET and NOTICE OF RIGHTS** are pre-printed forms which must be attached if child support is requested.
6. **NOTICE OF ENTRY OF JUDGMENT** This must be included in all cases. You must provide two stamped envelopes, one for each party, with this form.
7. **STIPULATION FOR ENTRY OF JUDGMENT** You may use this form if you and the other party have a complete agreement on all issues. You cannot use this form if proceeding by default or if there is no agreement. Both parties must sign and the Respondent must also pay a filing fee.

IF YOU HAVE AN AGREEMENT FROM MEDIATION OR OTHER ORDERS REGARDING CUSTODY OR SUPPORT, YOU MAY ATTACH THAT AGREEMENT OR ORDER TO THE JUDGMENT INSTEAD OF THE ATTACHMENTS PROVIDED.

IF YOU DO NOT HAVE AN AGREEMENT FOR CUSTODY AND THE OTHER PARTY HAS FILED A RESPONSE, YOU MUST FILE AN ORDER TO SHOW CAUSE TO GET A MEDIATION APPOINTMENT

IF THE DEPT. OF CHILD SUPPORT SERVICES IS COLLECTING CHILD SUPPORT UNDER A DIFFERENT CASE NUMBER, YOU MAY MAKE REFERENCE TO THAT CASE NUMBER IN THE JUDGMENT. YOU MAY NOT CHANGE THE SUPPORT ORDER IN THIS CASE.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <hr/> TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
REQUEST TO ENTER DEFAULT	CASE NUMBER:

1. **To the clerk:** Please enter the default of the respondent who has failed to respond to the petition.
2. A completed *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155) ☐ is attached ☐ is not attached.
 A completed *Property Declaration* (form FL-160) ☐ is attached ☐ is not attached
 because (check at least one of the following):
 - (a) ☐ there have been no changes since the previous filing.
 - (b) ☐ the issues subject to disposition by the court in this proceeding are the subject of a written agreement.
 - (c) ☐ there are no issues of child, spousal, or partner support or attorney fees and costs subject to determination by the court.
 - (d) ☐ the petition does not request money, property, costs, or attorney fees. (Fam. Code, § 2330.5.)
 - (e) ☐ there are no issues of division of community property.
 - (f) ☐ this is an action to establish parental relationship.

Date: _____

 (TYPE OR PRINT NAME)

 (SIGNATURE OF [ATTORNEY FOR] PETITIONER)

3. **Declaration**
 - a. ☐ No mailing is required because service was by publication or posting and the address of the respondent remains unknown.
 - b. ☐ A copy of this *Request to Enter Default*, including any attachments and an envelope with sufficient postage, was provided to the court clerk, with the envelope addressed as follows (address of the respondent's attorney or, if none, the respondent's last known address):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

 (TYPE OR PRINT NAME)

 (SIGNATURE OF DECLARANT)

FOR COURT USE ONLY
<input type="checkbox"/> <i>Request to Enter Default</i> mailed to the respondent or the respondent's attorney on (date): <input type="checkbox"/> Default entered as requested on (date): <input type="checkbox"/> Default not entered. Reason:
Clerk, by _____, Deputy

CASE NAME (Last name, first name of each party):	CASE NUMBER:
--	--------------

4. **Memorandum of costs**

a. ☐ Costs and disbursements are waived.

b. Costs and disbursements are listed as follows:

(1) ☐ Clerk's fees \$.....

(2) ☐ Process server's fees \$.....

(3) ☐ Other (specify): \$.....

..... \$.....

..... \$.....

..... \$.....

TOTAL \$.....

c. I am the attorney, agent, or party who claims these costs. To the best of my knowledge and belief, the foregoing items of cost are correct and have been necessarily incurred in this cause or proceeding.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.


Date:

_____		_____
(TYPE OR PRINT NAME)		(SIGNATURE OF DECLARANT)

5. **Declaration of nonmilitary status.** The respondent is not in the military service of the United States as defined in section 511 et seq. of the Servicemembers Civil Relief Act (50 U.S.C. Appen. § 501 et seq.), and is not entitled to the benefits of such act.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

_____		_____
(TYPE OR PRINT NAME)		(SIGNATURE OF DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
STIPULATION FOR ENTRY OF JUDGMENT RE: ESTABLISHMENT OF PARENTAL RELATIONSHIP	
CASE NUMBER:	

THE PARTIES STIPULATE THAT

1. ☐ Both parties have read and understand the *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235), which is submitted with this *Stipulation for Entry of Judgment*. Both parties give up these rights and freely agree that a judgment may be entered in accordance with this stipulation.
2. (Name of mother):
(Name of father):
are the parents of the following children:

<u>Name</u>	<u>Date of Birth</u>
-------------	----------------------
3. ☐ Child custody and visitation shall be ordered as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
4. ☐ Child support shall be ordered as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
5. ☐ Attorney fees shall be ordered as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
6. ☐ Names of the children shall be changed as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
7. ☐ Reasonable costs of pregnancy and birth shall be paid as ordered in the proposed *Judgment (Uniform Parentage)* (form FL-250).
8. ☐ Other orders shall be as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
9. ☐ The parties further agree that the court make the following orders:

☐ See attached.

Date:

 (TYPE OR PRINT NAME)


 (SIGNATURE OF PETITIONER/PLAINTIFF)

Date:

 (TYPE OR PRINT NAME)


 (SIGNATURE OF RESPONDENT/DEFENDANT)

Date:

 (TYPE OR PRINT NAME)


 (SIGNATURE OF ATTORNEY FOR PETITIONER/PLAINTIFF)

Date:

 (TYPE OR PRINT NAME)


 (SIGNATURE OF ATTORNEY FOR RESPONDENT/DEFENDANT)

PETITIONER:	CASE NUMBER:
RESPONDENT:	

ADVISEMENT AND WAIVER OF RIGHTS RE: ESTABLISHMENT OF PARENTAL RELATIONSHIP

- RIGHT TO BE REPRESENTED BY A LAWYER.** I understand that I have the right to be represented by a lawyer of my own choice at my own expense. If I cannot afford a lawyer, I can contact the Lawyer Referral Association of the local bar association or the Family Law Facilitator for assistance.
- RIGHT TO A TRIAL.** I understand that I have a right to have a judge determine whether I am the parent of the children named in this action.
- RIGHT TO CONFRONT AND CROSS-EXAMINE WITNESSES.** I understand that in a trial I have the right to confront and cross-examine the witnesses against me and to present evidence and witnesses in my own defense.
- RIGHT TO HAVE PARENTAGE TESTS.** I understand that, where the law permits, I have the right to have the court order parentage tests. The court will decide who pays for the tests. The court could order that I pay none, some, or all of the costs of the tests.
- OBLIGATIONS.** I understand that if I admit that I am the parent of the children in this action that those children will be my children for legal purposes.
- WAIVER.** I understand that I am admitting that I am the parent of the children named in the stipulation and am giving up the rights stated above (except the right to an attorney if I have an attorney).
- CHILD SUPPORT.** I understand that I will have the duty to contribute to the support of the children named in this action and that this duty of support will continue for each child until the obligation is terminated by law.
- CRIMINAL NON-SUPPORT.** I understand that if I willfully fail to support the children, criminal proceedings may be initiated against me.
- UNDERSTANDING.**
 - ☐ I have read and understand the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights*.
 - ☐ I understand the translation.

IF I AM REPRESENTED BY AN ATTORNEY, I ACKNOWLEDGE THAT MY ATTORNEY HAS READ AND EXPLAINED TO ME THE CONTENTS OF THE STIPULATION, RECITALS, AND WAIVERS, AND I ACKNOWLEDGE THAT I UNDERSTAND THEM.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

INTERPRETER'S DECLARATION

- The ☐ Petitioner ☐ Respondent is unable to read or understand the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights* because:
 - ☐ his/her primary language is (*specify*):
 - ☐ other (*specify*):
- I certify under penalty of perjury under the laws of the State of California that I have, to the best of my ability, read or translated for the ☐ Petitioner ☐ Respondent the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights*. ☐ Petitioner ☐ Respondent said he or she understood the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights* before signing them.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF INTERPRETER)

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, state bar number, and address):</i>		FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.:		
ATTORNEY FOR <i>(Name)</i> :		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER:		CASE NUMBER:
RESPONDENT:		
DECLARATION FOR DEFAULT OR UNCONTESTED JUDGMENT		

1. I declare that if I appeared in court and were sworn, I would testify to the truth of the facts in this declaration.
2. I request that proof will be by this declaration and that I will not appear before the court unless I am ordered by the court to appear.
3. All the information in the ☐ *Petition or Complaint to Establish Parental Relationship* ☐ *Response or Answer*
☐ *Petition to Establish Custody and Support* ☐ *Response* is true and correct.
4. ☐ Respondent and/or ☐ Petitioner is/are the parent(s) of the minor child(ren).
5. A Voluntary Declaration of Paternity form ☐ has ☐ has not been signed regarding this child (*attach a copy if available*).
6. DEFAULT OR UNCONTESTED (*Check a or b*)
 - a. ☐ The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition. **OR**
 - b. ☐ The parties have stipulated that the matter may proceed as an uncontested matter without notice, and the stipulation is attached.
7. ☐ CHILD SUPPORT should be ordered as set forth in the proposed *Judgment* (form FL-250).
 - a. ☐ Petitioner ☐ Respondent is presently receiving public assistance (TANF); thus all support should be made payable to the local child support agency at (*specify address*):

b. NOTE: If a support order is requested, submit a completed *Income and Expense Declaration* (form FL-150), or *Financial Statement (Simplified)* (form FL-155), unless a current form is on file. Include your best estimate of the other party's gross monthly income.
8. ☐ ATTORNEY FEES should be ordered as set forth in the proposed *Judgment* (form FL-250).
9. ☐ CHILD CUSTODY should be ordered as set forth in the proposed *Judgment* (form FL-250).
10. ☐ CHILD VISITATION should be ordered as set forth in the proposed *Judgment* (form FL-250).
11. ☐ REASONABLE EXPENSES OF PREGNANCY AND BIRTH should be ordered as set forth in the proposed *Judgment* (form FL-250).
12. ☐ NAMES OF THE CHILDREN should be changed as set forth in the proposed *Judgment* (form FL-250).
13. This declaration may be reviewed by a commissioner sitting as a temporary judge who may determine whether to grant this request or require my appearance.
14. I have read and understand the *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235), which is signed and attached to this declaration.
15. ☐ Other (*specify*):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

Page 1 of 1

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____ STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER: _____ RESPONDENT: _____	
JUDGMENT	
CASE NUMBER: _____	

1. ☐ This judgment ☐ contains personal conduct restraining orders ☐ modifies existing restraining orders.
 The restraining orders are contained in item(s): _____ of the attachment.
 They expire on (*date*): _____ A CLETS form must be attached.
2. a. This matter proceeded as follows: ☐ Default or uncontested ☐ By declaration ☐ Contested
 b. Date: _____ Dept.: _____ Room: _____
 c. Judicial officer (*name*): _____ ☐ Temporary judge
 d. ☐ Petitioner present ☐ Attorney present (*name*): _____
 e. ☐ Respondent present ☐ Attorney present (*name*): _____
 f. **Petitioner** (1) ☐ The petitioner appeared without counsel and was advised of relevant rights.
 (2) ☐ The petitioner signed *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235).
 (3) ☐ The petitioner is married to the Respondent, and no other action is pending.
 (4) ☐ The petitioner signed a Voluntary Declaration of Paternity.
 (5) ☐ There is a prior judgment of parentage in a family support, juvenile, or adoption court case.
 g. **Respondent** (1) ☐ The respondent appeared without counsel and was advised of relevant rights.
 (2) ☐ The respondent signed *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235).
 (3) ☐ The respondent is married to the Petitioner, and no other action is pending.
 (4) ☐ The respondent signed a Voluntary Declaration of Paternity.
 (5) ☐ There is a prior judgment of parentage in a family support, juvenile or adoption court case.
 h. Other parties or attorneys present (*specify*): _____

3. THE COURT FINDS

Name: ☐ Mother ☐ Father
 Name: ☐ Mother ☐ Father
 are the parents of the following children:
Child's name Date of birth

4. THE COURT ORDERS

- a. ☐ Child custody and visitation are as specified in one or more of the attached forms:
 (1) ☐ *Child Custody and Visitation Order Attachment* (form FL-341)
 (2) ☐ *Stipulation for Order for Child Custody and/or Visitation of Children* (form FL-355)
 (3) ☐ Other (*specify*): _____

PETITIONER:	CASE NUMBER:
RESPONDENT:	

5. THE COURT FURTHER ORDERS

- a. ☐ Child support is as stated in one or more of the attached:
- (1) ☐ *Child Support Information and Order Attachment* (form FL-342)
 - (2) ☐ *Stipulation to Establish or Modify Child Support and Order* (form FL-350)
 - (3) ☐ Other (*specify*):
- b. Both parties must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this judgment. Thereafter, the parents must notify the court of any change in the information submitted, within 10 days of the change.
- c. The form *Notice of Rights and Responsibilities—Health Care Costs and Reimbursement Procedures and Information Sheet on Changing a Child Support Order* (form FL-192) is attached.
- d. ☐ The last names of the children are changed to (*specify*):
- e. ☐ The birth certificates must be amended to conform to this court order by
- (1) ☐ adding the father's name.
 - (2) ☐ changing the last name of the children.
- f. ☐ Attorney fees and costs are as stated in the attachment.
- g. ☐ Reasonable expenses of pregnancy and birth are as stated in the attachment.
- h. ☐ Other (*specify*):

☐ Continued on Attachment 3h.

6. Number of pages attached: _____

Date:

JUDICIAL OFFICER
☐ SIGNATURE FOLLOWS LAST ATTACHMENT

NOTICE: Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

TO ☐ Findings and Order After Hearing ☐ Judgment
☐ Stipulation and Order for Custody and/or Visitation of Children
☐ Other (specify):

1. ☐ **Custody.** Custody of the minor children of the parties is awarded as follows:
- | <u>Child's name</u> | <u>Date of birth</u> | <u>Legal custody to</u>
(person who makes decisions about health, education, etc.) | <u>Physical custody to</u>
(person with whom the child lives) |
|---------------------|----------------------|---|--|
|---------------------|----------------------|---|--|

☐ Joint legal custody ☐ Joint physical custody

2. ☐ **Visitation**
- a. ☐ Reasonable right of visitation to the party without physical custody (**not appropriate in cases involving domestic violence**)
- b. ☐ See the attached _____-page document dated (*specify date*):
- c. ☐ The parties will go to mediation at (*specify location*):
- d. ☐ No visitation
- e. ☐ Visitation for the ☐ petitioner ☐ respondent will be as follows:

- (1) Weekends starting (date):

(The first weekend of the month is the first weekend with a Saturday.)

1st 2nd 3rd 4th 5th weekend of the month

from _____ at _____ a.m. p.m.
(day of week) (time)

to _____ at _____ a.m. p.m.
(day of week) (time)

- (a) ☐ The parents will alternate the fifth weekends, with the ☐ petitioner ☐ respondent having the initial fifth weekend, which starts (date):

- (b) The petitioner will have fifth weekends in odd even months.

- (2) ☐ **Alternate weekends starting (date):**

The petitioner respondent will have the children with him or her during the period

from _____ at _____ a.m. p.m.
(day of week) (time)

to _____ at _____ a.m. p.m.
(day of week) (time)

- (3) Weekdays starting (date):

The petitioner respondent will have the children with him or her during the period

from _____ at _____ a.m. p.m.
(day of week) (time)

to _____ at _____ a.m. p.m.
(day of week) (time)

- (4) ☐ **Other** (specify days and times as well as any additional restrictions):

☐ See Attachment 2e(4).

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	

3. ☐ **Supervised visitation.** Until ☐ further order of the court ☐ other (*specify*):
the ☐ petitioner ☐ respondent will have supervised visitation with the minor children according to the schedule set forth on page 1. **(You must attach form FL-341(A).)**
4. ☐ **Transportation for visitation**
- ☐ Transportation **to** the visits will be provided by the ☐ petitioner ☐ respondent ☐ other (*specify*):
 - ☐ Transportation **from** the visits will be provided by the ☐ petitioner ☐ respondent ☐ other (*specify*):
 - ☐ Drop-off of the children will be at (*address*):
 - ☐ Pick-up of the children will be at (*address*):
 - ☐ The children will be driven only by a licensed and insured driver. The car or truck must have legal child restraint devices.
 - ☐ During the exchanges, the parent driving the children will wait in the car and the other parent will wait in his or her home while the children go between the car and the home.
 - ☐ Other (*specify*):
5. ☐ **Travel with children.** The ☐ petitioner ☐ respondent ☐ other (*name*):
must have written permission from the other parent or a court order to take the children out of
- ☐ the state of California.
 - ☐ the following counties (*specify*):
 - ☐ other places (*specify*):
6. ☐ **Child abduction prevention.** There is a risk that one of the parents will take the children out of California without the other parent's permission. Form FL-341(B) is attached and must be obeyed.
7. ☐ **Holiday schedule.** The children will spend holiday time as listed in the attached ☐ form FL-341(C) ☐ other (*specify*):
8. ☐ **Additional custody provisions.** The parents will follow the additional custody provisions listed in the attached ☐ form FL-341(D) ☐ other (*specify*):
9. ☐ **Joint legal custody.** The parents will share joint legal custody as listed in the attached ☐ form FL-341(E) ☐ other (*specify*):
10. ☐ **Other** (*specify*):
11. **Jurisdiction.** This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (part 3 of the California Family Code, commencing with section 3400).
12. **Notice and opportunity to be heard.** The responding party was given notice and an opportunity to be heard, as provided by the laws of the State of California.
13. **Country of habitual residence.** The country of habitual residence of the child or children in this case is ☐ the United States ☐ other (*specify*):
14. **Penalties for violating this order.** If you violate this order, you may be subject to civil or criminal penalties, or both.

PETITIONER / PLAINTIFF:	CASE NUMBER:
RESPONDENT / DEFENDANT:	

SUPERVISED VISITATION ORDER
Attachment to *Child Custody and Visitation Order Attachment* (form FL-341)

1. Evidence has been presented in support of a request that the contact of ☐ Petitioner ☐ Respondent with the child(ren) be supervised based upon allegations of
- ☐ abduction of child(ren) ☐ physical abuse ☐ drug abuse ☐ neglect
☐ sexual abuse ☐ domestic violence ☐ alcohol abuse ☐ other (*specify*):
- ☐ Petitioner ☐ Respondent disputes these allegations and the court reserves the findings on these issues pending further investigation and hearing or trial.
2. The court finds, under Family Code section 3100, that the best interest of the child(ren) requires that visitation by ☐ Petitioner ☐ Respondent must, until further order of the court, be limited to contact supervised by the person(s) set forth in item 6 below pending further investigation and hearing or trial.

THE COURT MAKES THE FOLLOWING ORDERS

3. CHILD(REN) TO BE SUPERVISED

Child's name Birth date Age Sex

4. TYPE

- a. ☐ Supervised visitation b. ☐ Supervised exchange only c. ☐ Therapeutic visitation

5. SUPERVISED VISITATION PROVIDER

- a. ☐ Professional (individual provider or supervised visitation center) b. ☐ Nonprofessional

6. AUTHORIZED PROVIDER

Name Address Telephone

☐ Any other mutually agreed-upon third party as arranged.

7. DURATION AND FREQUENCY OF VISITS (*see form FL-341 for specifics of visitation*):

8. PAYMENT RESPONSIBILITY Petitioner: _____% Respondent: _____%

9. ☐ Petitioner will contact professional provider or supervised visitation center no later than (*date*):
☐ Respondent will contact professional provider or supervised visitation center no later than (*date*):

10. THE COURT FURTHER ORDERS

Date: _____

JUDICIAL OFFICER

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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CHILD SUPPORT INFORMATION AND ORDER ATTACHMENT

Attachment to ☐ Findings and Order After Hearing ☐ Restraining Order After Hearing (CLETS)
☐ Judgment ☐ Other

THE COURT USED THE FOLLOWING INFORMATION IN DETERMINING THE AMOUNT OF CHILD SUPPORT:

1. ☐ A printout of a computer calculation and findings is attached and incorporated in this order for all required items not filled out below.
2. ☐ **Income**

	<u>Gross monthly</u> <u>income</u>	<u>Net monthly</u> <u>income</u>	<u>Receiving</u> <u>TANF/CalWORKS</u>
a. Each parent's monthly income is as follows:			
petitioner/plaintiff:	\$	\$	<input type="text"/>
respondent/defendant:	\$	\$	<input type="text"/>
other parent:	\$	\$	<input type="text"/>
b. Imputation of income. The court finds that the <input type="checkbox"/> petitioner/plaintiff <input type="checkbox"/> respondent/defendant <input type="checkbox"/> other parent has the capacity to earn: \$ _____ per: _____ and has based the support order upon this imputed income.			
3. ☐ **Children of This Relationship**
 - a. Number of children who are the subjects of the support order (*specify*): _____
 - b. Approximate percentage of time spent with:

petitioner/plaintiff	%
respondent/defendant	%
other parent	%

4. ☐ **Hardships**

Hardships for the following have been allowed in calculating child support:

	<u>petitioner/ plaintiff</u>	<u>respondent/ defendant</u>	<u>other parent</u>	<u>Approximate ending time for the hardship</u>
a. <input type="checkbox"/> Other minor children:	\$	\$	\$	
b. <input type="checkbox"/> Extraordinary medical expenses:	\$	\$	\$	
c. <input type="checkbox"/> Catastrophic losses:	\$	\$	\$	

THE COURT ORDERS

5. ☐ **Low-Income Adjustment**

- a. ☐ The low-income adjustment applies.
- b. ☐ The low-income adjustment does not apply because (*specify reasons*): _____

6. ☐ **Child Support**

a. **Base child support**

☐ Petitioner/plaintiff ☐ Respondent/defendant ☐ Other parent must pay child support beginning (*date*): _____ and continuing until further order of the court, or until the child marries, dies, is emancipated, reaches age 19, or reaches age 18 and is not a full-time high school student, whichever occurs first, as follows:

<u>Child's name</u>	<u>Date of birth</u>	<u>Monthly amount</u>	<u>Payable to (name)</u>
---------------------	----------------------	-----------------------	--------------------------

Payable ☐ on the 1st of the month ☐ one-half on the 1st and one-half on the 15th of the month
☐ other (*specify*): _____

b. ☐ **Mandatory additional child support**

- (1) ☐ Child-care costs related to employment or reasonably necessary job training.

<input type="checkbox"/> Petitioner/plaintiff must pay:	%	of total	or	<input type="text"/> \$	per month	child-care costs.
<input type="checkbox"/> Respondent/defendant must pay:	%	of total	or	<input type="text"/> \$	per month	child-care costs.
<input type="checkbox"/> Other parent must pay:	%	of total	or	<input type="text"/> \$	per month	child-care costs.
<input type="checkbox"/> Costs to be paid as follows (<i>specify</i>): _____						

THIS IS A COURT ORDER.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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THE COURT FURTHER ORDERS

6. b. Mandatory additional child support (*continued*)

- (2) ☐ Reasonable uninsured health-care costs for the children
- | | | | | | |
|--|---|----------|----|-----------------------------|------------|
| <input type="checkbox"/> Petitioner/plaintiff must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Respondent/defendant must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Other parent must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Costs to be paid as follows (<i>specify</i>): | | | | | |

c. ☐ Additional child support

- (1) ☐ Costs related to the educational or other special needs of the children
- | | | | | | |
|--|---|----------|----|-----------------------------|------------|
| <input type="checkbox"/> Petitioner/plaintiff must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Respondent/defendant must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Other parent must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Costs to be paid as follows (<i>specify</i>): | | | | | |
- (2) ☐ Travel expenses for visitation
- | | | | | | |
|--|---|----------|----|-----------------------------|------------|
| <input type="checkbox"/> Petitioner/plaintiff must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Respondent/defendant must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Other parent must pay: | % | of total | or | <input type="checkbox"/> \$ | per month. |
| <input type="checkbox"/> Costs to be paid as follows (<i>specify</i>): | | | | | |

Total child support per month: \$

7. Health-Care Expenses

- a. Health insurance coverage for the minor children of the parties must be maintained by the
☐ petitioner/plaintiff ☐ respondent/defendant ☐ other parent if available at no or reasonable cost through their respective places of employment or self-employment. Both parties are ordered to cooperate in the presentation, collection, and reimbursement of any health-care claims.
- b. ☐ Health insurance is not available to the ☐ petitioner/plaintiff ☐ respondent/defendant ☐ other parent at a reasonable cost at this time.
- c. ☐ The party providing coverage must assign the right of reimbursement to the other party.

8. Earnings Assignment

An *Order/Notice to Withhold Income for Child Support* (form FL-195) must issue. **Note:** The payor of child support is responsible for the payment of support directly to the recipient until support payments are deducted from the payor's wages, and for any support not paid by the assignment.

9. ☐ Non-Guideline Order

This order does not meet the child support guideline set forth in Family Code section 4055. A *Non-Guideline Child Support Findings Attachment* (form FL-342(A)) is attached.

10. ☐ Employment Search Order (Family Code, § 4505)

☐ Petitioner/plaintiff ☐ Respondent/defendant ☐ Other parent is ordered to seek employment with the following terms and conditions:

11. Other Orders (*specify*):

12. Required Attachments

A *Notice of Rights and Responsibilities—Health Care Costs and Reimbursement Procedures and Information Sheet on Changing a Child Support Order* (form FL-192) must be attached and is incorporated into this order.

13. Child Support Case Registry Form

Both parties must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this order. Thereafter, the parties must notify the court of any change in the information submitted within 10 days of the change by filing an updated form.

NOTICE: Any party required to pay child support must pay interest on overdue amounts at the legal rate, which is currently 10 percent per year.

THIS IS A COURT ORDER.

NOTICE OF RIGHTS AND RESPONSIBILITIES

Health-Care Costs and Reimbursement Procedures

IF YOU HAVE A CHILD SUPPORT ORDER THAT INCLUDES A PROVISION FOR THE REIMBURSEMENT OF A PORTION OF THE CHILD'S OR CHILDREN'S HEALTH-CARE COSTS AND THOSE COSTS ARE NOT PAID BY INSURANCE, THE LAW SAYS:

1. Notice. You must give the other parent an itemized statement of the charges that have been billed for any health-care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 30 days after those costs were given to you.

2. Proof of full payment. If you have already paid all of the uninsured costs, you must (1) give the other parent proof that you paid them and (2) ask for reimbursement for the other parent's court-ordered share of those costs.

3. Proof of partial payment. If you have paid only your share of the uninsured costs, you must (1) give the other parent proof that you paid your share, (2) ask that the other parent pay his or her share of the costs directly to the health-care provider, and (3) give the other parent the information necessary for that parent to be able to pay the bill.

4. Payment by notified parent. If you receive notice from a parent that an uninsured health-care cost has been incurred, you must pay your share of that cost within the time the court orders; or if the court has not specified a period of time, you must make payment (1) within 30 days from the time you were given notice of the amount due, (2) according to any payment schedule set by the health-care provider, (3) according to a schedule agreed to in writing by you and the other parent, or (4) according to a schedule adopted by the court.

5. Disputed charges. If you dispute a charge, you may file a motion in court to resolve the dispute, but only if you pay that charge before filing your motion.

If you claim that the other party has failed to reimburse you for a payment, or the other party has failed to make a payment to the provider after proper notice has been given, you may file a motion in court to resolve the dispute. The court will presume that if uninsured costs have been paid, those costs were reasonable. The court may award attorney fees and costs against a party who has been unreasonable.

6. Court-ordered insurance coverage. If a parent provides health-care insurance as ordered by the court, that insurance must be used at all times to the extent that it is available for health-care costs.

- a. **Burden to prove.** The party claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.
- b. **Cost of additional coverage.** If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.

7. Preferred health providers. If the court-ordered coverage designates a preferred health-care provider, that provider must be used at all times consistent with the terms of the health insurance policy. When any party uses a health-care provider other than the preferred provider, any health-care costs that would have been paid by the preferred health provider if that provider had been used must be the sole responsibility of the party incurring those costs.

INFORMATION SHEET ON CHANGING A CHILD SUPPORT ORDER

General Information

The court has just made a child support order in your case. This order will remain the same unless a party to the action requests that the support be changed (modified). An order for child support can be modified only by filing a motion to change child support and serving each party involved in your case. If both parents and the local child support agency (if it is involved) agree on a new child support amount, you can complete, have all parties sign, and file with the court a *Stipulation to Establish or Modify Child Support and Order* (form FL-350) or *Stipulation and Order (Governmental)* (form FL-625).

When a Child Support Order May Be Modified

The court takes several things into account when ordering the payment of child support. First, the number of children is considered. Next, the net incomes of both parents are determined, along with the percentage of time each parent has physical custody of the children. The court considers both parties' tax filing status and may consider hardships, such as a child of another relationship. An existing order for child support may be modified when the net income of one of the parents changes significantly, the parenting schedule changes significantly, or a new child is born.

Examples

- You have been ordered to pay \$500 per month in child support. You lose your job. You will continue to owe \$500 per month, plus 10 percent interest on any unpaid support, unless you file a motion to modify your child support to a lower amount and the court orders a reduction.
- You are currently receiving \$300 per month in child support from the other parent, whose net income has just increased substantially. You will continue to receive \$300 per month unless you file a motion to modify your child support to a higher amount and the court orders an increase.
- You are paying child support based upon having physical custody of your children 30 percent of the time. After several months it turns out that you actually have physical custody of the children 50 percent of the time. You may file a motion to modify child support to a lower amount.

How to Change a Child Support Order

To change a child support order, you must file papers with the court. *Remember:* You must follow the order you have now.

What forms do I need?

If you are asking to change a child support order open with the local child support agency, you must fill out one of these forms:

- FL-680, *Notice of Motion (Governmental)* **or** FL-683 *Order to Show Cause (Governmental)* **and**
- FL-684, *Request for Order and Supporting Declaration (Governmental)*

If you are asking to change a child support order that is **not** open with the local child support agency, you must fill out one of these forms:

- FL-301, *Notice of Motion* **or** FL-300, *Order to Show Cause* **and**
- FL-310, *Application for Order and Supporting Declaration* **or**
- FL-390, *Notice of Motion and Motion for Simplified Modification of Order for Child, Spousal, or Family Support*

You must also fill out one of these forms:

- FL-150, *Income and Expense Declaration* **or** FL-155, *Financial Statement (Simplified)*

What if I am not sure which forms to fill out?

Talk to the family law facilitator at your court.

After you fill out the forms, file them with the court clerk and ask for a hearing date. Write the hearing date on the form.

The clerk will ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:

- Form 982(a)(17), *Application for Waiver of Court Fees and Costs*
- Form 982(a)(18), *Order on Application for Waiver of Court Fees and Costs*

You must serve the other parent. If the local child support agency is involved, serve it too.

This means someone 18 or over—**not you**—must serve the other parent copies of your filed court forms at least **16 court days** before the hearing. Add **5 calendar days** if you serve by mail within California (see Code of Civil Procedure section 1005 for other situations).

Court days are weekdays when the court is open for business (Monday through Friday except court holidays). **Calendar days** include all days of the month, including weekends and holidays. To determine court and calendar days, go to

www.courtinfo.ca.gov/selfhelp/courtcalendars/.

The server must also serve blank copies of these forms:

- FL-320, *Responsive Declaration to Order to Show Cause or Notice of Motion* **and** FL-150, *Income and Expense Declaration*, **or**
- FL-155, *Financial Statement (Simplified)*

Then the server fills out and signs a *Proof of Service* (form FL-330 or FL-335). Take this form to the clerk and file it.

Go to your hearing and ask the judge to change the support. Bring your tax returns from the last two years and your last two months' pay stubs. The judge will look at your information, listen to both parents, and make an order. After the hearing, fill out:

- FL-340, *Findings and Order After Hearing* **and**
- FL-342, *Child Support Information and Order Attachment*

Need help?

Contact the family law facilitator in your county or call your county's bar association and ask for an experienced family lawyer.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <hr style="width: 100%;"/> TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
NOTICE OF ENTRY OF JUDGMENT	
CASE NUMBER:	

You are notified that the following judgment was entered on (date):

1. ☐ Dissolution
2. ☐ Dissolution—status only
3. ☐ Dissolution—reserving jurisdiction over termination of marital status or domestic partnership
4. ☐ Legal separation
5. ☐ Nullity
6. ☐ Parent-child relationship
7. ☐ Judgment on reserved issues
8. ☐ Other (specify): _____

Date: _____ Clerk, by _____, Deputy

—NOTICE TO ATTORNEY OF RECORD OR PARTY WITHOUT ATTORNEY—

Under the provisions of Code of Civil Procedure section 1952, if no appeal is filed the court may order the exhibits destroyed or otherwise disposed of after 60 days from the expiration of the appeal time.

<p style="text-align: center;">STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION</p> <p>Effective date of termination of marital or domestic partnership status (specify): _____</p> <p>WARNING: Neither party may remarry or enter into a new domestic partnership until the effective date of the termination of marital or domestic partnership status, as shown in this box.</p>
--

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of the *Notice of Entry of Judgment* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed at (place): _____, California, on (date): _____

Date: _____ Clerk, by _____, Deputy

Name and address of petitioner or petitioner's attorney
 Name and address of respondent or respondent's attorney

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (Optional):</div> </div> E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	COURT PERSONNEL: STAMP DATE RECEIVED HERE <div style="font-size: 1.5em; font-weight: bold; margin-top: 20px;">DO NOT FILE</div>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
<div style="text-align: center; font-weight: bold;">CHILD SUPPORT CASE REGISTRY FORM</div> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Mother <input type="checkbox"/> Father </div> <div> <input type="checkbox"/> First form completed <input type="checkbox"/> Change to previous information </div> </div>	CASE NUMBER:

THIS FORM WILL NOT BE PLACED IN THE COURT FILE. IT WILL BE
MAINTAINED IN A CONFIDENTIAL FILE WITH THE STATE OF CALIFORNIA.

Notice: Pages 1 and 2 of this form must be completed and delivered to the court along with the court order for support. Pages 3 and 4 are instructional only and do not need to be delivered to the court. If you did not file the court order, you must complete this form and deliver it to the court within 10 days of the date on which you received a copy of the support order. Any later change to the information on this form must be delivered to the court on another form within 10 days of the change. It is important that you keep the court informed in writing of any changes of your address and telephone number.

1. Support order information (*this information is on the court order you are filing or have received*).

a. Date order filed:

b. ☐ Initial child support or family support order ☐ Modification

c. Total monthly base current child or family support amount ordered for children listed below, plus any monthly amount ordered payable on past-due support:

Child Support:

(1) ☐ Current base child support: \$ ☐ Reserved order ☐ \$0 (zero) order

(2) ☐ Additional monthly support: \$

(3) ☐ Total past-due support: \$

(4) ☐ Payment on past-due support: \$

(5) Wage withholding was ☐ ordered ☐ ordered but stayed until (date):

Family Support:

☐ Current base family support: \$ ☐ Reserved order ☐ \$0 (zero) order

☐ Additional monthly support: \$

☐ Total past-due support: \$

☐ Payment on past-due support: \$

Spousal Support:

☐ Current spousal support: \$ ☐ Reserved order ☐ \$0 (zero) order

☐ Total past-due support: \$

☐ Payment on past-due support: \$

2. Person required to pay child or family support (*name*):

Relationship to child (*specify*):

3. Person or agency to receive child or family support payments (*name*):

Relationship to child (*if applicable*):

TYPE OR PRINT IN INK

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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4. The child support order is for the following children:

Child's name

Date of birth

Social security number

- a.
- b.
- c.

☐ Additional children are listed on a page attached to this document.

You are required to complete the following information about yourself. You are not required to provide information about the other person, but you are encouraged to provide as much as you can. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

5. Father's name:

6. Mother's name:

- a. Date of birth:
- b. Social security number:
- c. Street address:

- a. Date of birth:
- b. Social security number:
- c. Street address:

City, state, zip code:

City, state, zip code:

d. Mailing address:

d. Mailing address:

City, state, zip code:

City, state, zip code:

e. Driver's license number:

e. Driver's license number:

State:

State:

f. Telephone number:

f. Telephone number:

g. ☐ Employed ☐ Not employed ☐ Self-employed

g. ☐ Employed ☐ Not employed ☐ Self-employed

Employer's name:

Employer's name:

Street address:

Street address:

City, state, zip code:

City, state, zip code:

Telephone number:

Telephone number:

7. ☐ A restraining order, protective order, or nondisclosure order due to domestic violence is in effect.

- a. The order protects: ☐ Father ☐ Mother ☐ Children
- b. From: ☐ Father ☐ Mother
- c. The restraining order expires on (date):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:



(TYPE OR PRINT NAME)

(SIGNATURE OF PERSON COMPLETING THIS FORM)

INFORMATION SHEET FOR CHILD SUPPORT CASE REGISTRY FORM

(Do NOT deliver this Information Sheet to the court clerk.)

Please follow these instructions to complete the *Child Support Case Registry Form* (form FL-191) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form.

Both parents must complete a *Child Support Case Registry Form*. The information on this form will be included in a national database that, among other things, is used to locate absent parents. When you file a court order, you must deliver a completed form to the court clerk along with your court order. If you did not file a court order, you must deliver a completed form to the court clerk **WITHIN 10 DAYS** of the date you received a copy of your court order. If any of the information you provide on this form changes, you must complete a new form and deliver it to the court clerk within 10 days of the change. The address of the court clerk is the same as the one shown for the superior court on your order. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

INSTRUCTIONS FOR COMPLETING THE *CHILD SUPPORT CASE REGISTRY FORM* (TYPE OR PRINT IN INK):

If the top section of the form has already been filled out, skip down to number 1 below. If the top section of the form is blank, you must provide this information.

Page 1, first box, top of form, left side: Print your name, address, telephone number, fax number, and e-mail address, if any, in this box. Attorneys must include their State Bar identification numbers.

Page 1, second box, top of form, left side: Print the name of the county and the court's address in this box. Use the same address for the court that is on the court order you are filing or have received.

Page 1, third box, top of form, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the court order you are filing or have received.

Page 1, fourth box, top of form, left side: Check the box indicating whether you are the mother or the father. If you are the attorney for the mother, check the box for mother. If you are the attorney for the father, check the box for father. Also, if this is the first time you have filled out this form, check the box by "First form completed." If you have filled out form FL-191 before, and you are changing any of the information, check the box by "Change to previous information."

Page 1, first box, right side: Leave this box blank for the court's use in stamping the date of receipt.

Page 1, second box, right side: Print the court case number in this box. This number is also shown on the court papers.

Instructions for numbered paragraphs:

1. a. Enter the date the court order was filed. This date is shown in the "COURT PERSONNEL: STAMP DATE RECEIVED HERE" box on page 1 at the top of the order on the right side. If the order has not been filed, leave this item blank for the court clerk to fill in.
- b. If the court order you filed or received is the first child or family support order for this case, check the box by "Initial child support or family support order." If this is a change to your order, check the box by "Modification."
- c. Information regarding the amount and type of support ordered and wage withholding is on the court order you are filing or have received.
 - (1) If your order provides for any type of current support, check all boxes that describe that support. For example, if your order provides for both child and spousal support, check both of those boxes. If there is an amount, put it in the blank provided. If the order says the amount is reserved, check the "Reserved order" box. If the order says the amount is zero, check the "\$0 (zero) order" box. Do not include child care, special needs, uninsured medical expenses, or travel for visitation here. These amounts will go in (2). Do NOT complete the Child Support Case Registry form if you receive spousal support only.
 - (2) If your order provides for a set monthly amount to be paid as additional support for such needs as child care, special needs, uninsured medical expenses or travel for visitation check the box in Item 2 and enter the monthly amount. For example, if your order provides for base child support and in addition the paying parent is required to pay \$300 per month, check the box in item 2 underneath the "Child Support" column and enter \$300. Do NOT check this box if your order provides only for a payment of a percentage, such as 50% of the childcare.

- (3) If your order determined the amount of past due support, check the box in Item 3 that states the type of past due support and enter the amount. For example, if the court determined that there was \$5000 in past due child support and \$1000 in past due spousal support, you would check the box in item 3 in the "Child Support" column and enter \$5000 and you would also check the box in item 3 in the "Spousal Support" column and enter \$1000.
 - (4) If your order provides for a specific dollar amount to be paid towards any past due support, check the box in Item 4 that states the type of past due support and enter the amount. For example, the court ordered \$350 per month to be paid on the past due child support, you would check the box in Item 4 in the "Child Support" column and enter \$350.
 - (5) Check the "ordered" box if wage withholding was ordered with no conditions. Check the box "ordered but stayed until" if wage withholding was ordered but is not to be deducted until a later date. If the court delayed the effective date of the wage withholding, enter the specific date. Check only one box in this item.
2. a. Write the name of the person who is supposed to pay child or family support.
b. Write the relationship of that person to the child.
 3. a. Write the name of the person or agency supposed to receive child or family support payments.
b. Write the relationship of that person to the child.
 4. List the full name, date of birth, and social security number for each child included in the support order. If there are more than five children included in the support order, check the box below item 4e and list the remaining children with dates of birth and social security numbers on another sheet of paper. Attach the other sheet to this form.

The local child support agency is required, under section 466(a)(13) of the Social Security Act, to place in the records pertaining to child support the social security number of any individual who is subject to a divorce decree, support order, or paternity determination or acknowledgment. This information is mandatory and will be kept on file at the local child support agency.

Top of page 2, box on left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on page 1.

Top of page 2, box on right side: Print your court case number in this box. Use the same case number as on page 1, second box, right side.

You are required to complete information about yourself. If you know information about the other person, you may also fill in what you know about him or her.

5. If you are the father in this case, list your full name in this space. See instructions for a–g under item 6 below.
6. If you are the mother in this case, list your full name in this space.
 - a. List your date of birth.
 - b. Write your social security number.
 - c. List the street address, city, state, and zip code where you live.
 - d. List the street address, city, state, and zip code where you want your mail sent, if different from the address where you live.
 - e. Write your driver's license number and the state where it was issued.
 - f. List the telephone number where you live.
 - g. Indicate whether you are employed, not employed, self-employed, or by checking the appropriate box. If you are employed, write the name, street address, city, state, zip code, and telephone number where you work.
7. If there is a restraining order, protective order, or nondisclosure order, check this box.
 - a. Check the box beside each person who is protected by the restraining order.
 - b. Check the box beside the parent who is restrained.
 - c. Write the date the restraining order expires. See the restraining order, protective order, or nondisclosure order for this date.

If you are in fear of domestic violence, you may want to ask the court for a restraining order, protective order, or nondisclosure order.

You must type or print your name, fill in the date, and sign the *Child Support Case Registry Form* under penalty of perjury. When you sign under penalty of perjury, you are stating that the information you have provided is true and correct.